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7590

04/07/2008

Jason M Honeyman
Wolf Greenfield & Sacks P C
600 Atlantic Ave
Boston, MA 02210

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/VIA EFS-WEB/	(Depositor's name)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/661,623	09/14/2000	Dennis Chirok	D0188/7125	8712

TITLE OF INVENTION: IMPLANTABLE PROSTHESIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	07/07/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
MATTHEWS, WILLIAM H	3774	623-014130

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.362).

☐ Change of correspondence address (or Change of Correspondence Address form PTOL/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTOL/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

C.R. Bard, Inc.

Murray Hill, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first recopy any previously paid issue fee shown above)

☐ A check is enclosed.☒ Payment by credit card. Form ~~PTO-2038~~ is attached.

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

6/19/08

Typed or printed name

James M. Hanifin, Jr.

Registration No.

39,213

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